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Fill in this information to identify your case	e:	
United States Bankruptcy Court for the:	vania	
Eastern District of Pennsylv	<u>rania</u>	
Case number (If known):	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	Chapter 12	☐ Check if this is an
	Chapter 13	amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Zahaire	
	Write the name that is on your	First name	First name
	government-issued picture identification (for example, your	Dyshae Middle name	
	driver's license or passport).	Knight	Middle name
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
,	All other names you have		
2.	used in the last 8 years	First name	First name
	Include your married or maiden names and any assumed, trade names and <i>doing business as</i>	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any separate legal entity such as a		
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>3</u> <u>6</u> <u>7</u> <u>5</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1		Zahaire	Dyshae	Knight	Case number (if known)		
		First Name	Middle Name	Last Name			
			About Debtor 1	:		About Debtor 2 (Spo	ouse Only in a Joint Case):
4.	Your Emplo	yer Identification					
	Number (El		 EIN			EIN	
			 EIN				
5.	Where you	live				If Debtor 2 lives at a	different address:
			2043 West In	diana Avenue			
			Number St	reet		Number Street	
			<u>Philadelphia</u>				
			City	State ZIP (ode	City	State ZIP Code
			Philadelphia				
			County			County	
				address is different from the or ote that the court will send any n ng address.		If Debtor 2's mailing it in here. Note that the at this mailing address	address is different from yours, fill he court will send any notices to you ss.
			Number St	treet		Number Street	
			P.O. Box			P.O. Box	
			City	State ZIP 0	Code	City	State ZIP Code
	Why you or	a abassing <i>thi</i> s	01 1			01 1	
6.		e choosing <i>thi</i> s le for bankruptcy	Check one:			Check one:	
		,	Over the last have lived in district.	st 180 days before filing this pet n this district longer than in any	ition, I other	Over the last 180 have lived in this district.	D days before filing this petition, I district longer than in any other
				her reason. Explain. S.C. § 1408)		I have another re (See 28 U.S.C. §	eason. Explain. § 1408)
							_

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Debt	tor 1 Zahaire	Dyshae	Knight		Case nun	mber (if known)		
	First Name	Middle Name	Last Name			,		
Par	t 2: Tell the Court About Y	our Bankrup	tcy Case					
7.	The chapter of the Bankrupto Code you are choosing to file under		(Form 2010)). Also, go to the ter 7 ter 11 ter 12			§ 342(b) for Individuals Filing for ate box.		
8.	How you will pay the fee	details check, a credit I need to Pay I reque judge n official choose	about how you may pay. Typ or money order. If your attorn card or check with a pre-print to pay the fee in installments. The Filing Fee in Installments at that my fee be waived (Yonay, but is not required to, wa poverty line that applies to yo	cally, if you are pay ey is submitting you sted address. If you choose this s (Official Form 103) u may request this of ive your fee, and mour family size and y	option, sign and a A). option only if you a ay do so only if yo ou are unable to p	k's office in your local court for more f, you may pay with cash, cashier's r behalf, your attorney may pay with ttach the <i>Application for Individuals</i> re filing for Chapter 7. By law, a ur income is less than 150% of the ay the fee in installments). If you <i>Filing Fee Waived</i> (Official Form		
9.	Have you filed for bankruptcy within the last 8 years?	☐ Yes. _{Di}	strictstrict	WhenWhen	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?		ebtorstrictebtor		// DD / YYYY	Relationship to you Case number, if known Relationship to you		
		Di	strict	When MN	M / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	☑ Yes. ⊢	Go to line 12. las your landlord obtained an No. Go to line 12. Yes. Fill out <i>Initial Statem</i> as part of this bankruptcy	ent About an Evictio		st You (Form 101A) and file it		

Debtor 1

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Debtor 1 Zahaire		Dy	Dyshae Knight			Case number (if known)				
	First Name		Middle Name Last Name							
Par	t 3: Report About A	ny Business	ses You Own a	as a Sole Proprietor						
12.	Are you a sole proprie	etor of	No. Go to Part	4.						
	any full- or part-time business?		Yes. Name and	l location of business						
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Name of business, if any							
	corporation, partnership		Number S	treet						
	If you have more than or proprietorship, use a se sheet and attach it to th	parate								
	petition.		City		State	ZIP Code				
			Check the appropriate box to describe your business:							
			Health Car	e Business (as defined in 11 L	J.S.C. § 101(27A))				
			☐ Single Ass	et Real Estate (as defined in 1	1 U.S.C. § 101(5	1B))				
			☐ Stockbroke	er (as defined in 11 U.S.C. § 1	01(53A))					
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))							
			☐ None of the above							
13.	Are you filing under 0 11 of the Bankruptcy 0 and are you a small be debtor?	Code, ap usiness sh	opropriate deadlin neet, statement of	es. If you indicate that you are	e a small business ent, and federal in	u are a small business debtor so that it can set s debtor, you must attach your most recent balance acome tax return or if any of these documents do not				
	For a definition of small		No. Iam no	ot filing under Chapter 11.						
	debtor, see 11 U.S.C. § 101(51D).			ing under Chapter 11, but I an uptcy Code.	n NOT a small bus	siness debtor according to the definition in the				
						btor according to the definition in the der Subchapter V of Chapter 11.				
				ing under Chapter 11, I am a suptcy Code, and I choose to pr		btor according to the definition in the chapter V of Chapter 11.				

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Deb	tor 1	Zahaire	Dyshae	Knight			Case number (if	known) _		
		First Name	Middle Name	Last Name			`	,		
Par	t 4: Repor	t if You Own or Ha	ave Any Haz	ardous Property or	Any Prope	rty That Needs	s Immediate A	ttention	n	
14.	Do you ow	n or have any	☑ No.							
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate		☐ Yes. W	Vhat is the hazard?						
	attention?		If	immediate attention is r	needed, why	is it needed?				
		e, do you own loods, or livestock								
		e fed, or a building urgent repairs?								•
			W	Vhere is the property?						
					Number	Street				•
					City			State	ZIP Code	•

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Debtor 1	Zahaire	Dyshae	Knight	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debt	tor 1	Zahaire	Dysha	e Knight		Case	Case number (if known)	
		First Name	Middle N	lame Last Name				
Par	t 6: Answer	These Question	ns for R	eporting Purposes				
16.	What kind of have?	debts do you	16a.			er debts? Consumer debts are of for a personal, family, or house		
			16b.			s debts? Business debts are de rough the operation of the busine		
			16c.	State the type of debts you ov	ve th	at are not consumer debts or bu	siness d	ebts.
17.		g under Chapter 73	· \(\sqrt{1}\)	No. I am not filing under Charte			vomat na	onorth is evaluded and
	exempt prop and administ paid that fun	nate that after any erty is excluded trative expenses and will be available on to unsecured	·e			Do you estimate that after any ear paid that funds will be available		
18.	How many c estimate that	reditors do you t you owe?	3	1-49	0	□ 25,001-50,000 □ 50,0	00-100,C	000
19.	How much d assets to be	o you estimate you worth?	ur 1	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	liabilities to I		ur 🔲	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign Be	PIOW						
Foi	you	If I have States (If no att have ob I reques I unders	e chosen Code. I un orney reportained and strelief in stand ma	to file under Chapter 7, I am avenderstand the relief available understand the relief available understand the and I did not pay ond read the notice required by accordance with the chapter of king a false statement, conceal	ware nder or ag 11 U of title	each chapter, and I choose to p ree to pay someone who is not a .S.C. § 342(b). e 11, United States Code, specific property, or obtaining money or p	nder Charoceed un attorned ed in this property I	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I is petition.
		and 357	71.	nire Dyshae Knight	, 	or amprisoration up to 20 year	, OI DC	10 0.0.0. 33 102, 1041, 1013,
		· -		yshae Knight, Debtor 1				
		E	xecuted	on <u>05/30/2025</u> MM/ DD/ YYYY				

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Debtor 1	Zahaire	Dyshae	Knight	Case number (if known)
	First Name	Middle Name	Last Name	
represented	torney, if you are d by one not represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 34	Chapter 7, 11, 12, or 13 of or which the person is eligible 2(b) and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by a \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Mich	ael A. Cibik	Date 05/30/2025
		• —	of Attorney for Debtor	MM / DD / YYYY
		Michael Printed na Cibik La Firm name 1500 Wa Number	me w, P.C.	
		Philadel	nhia	PA 19102
		City	рпа	State ZIP Code
		Contact ph	none <u>(215) 735-1060</u>	Email address cibik@cibiklaw.com
		23110		PA_
		Bar numbe	er	State

Fill in this	s informa	ation to identify y	our case an	d this filing:				
Debtor 1		Zahaire	Dysh	ae	Knight			
		First Name	Middle	Name	Last Name		_	
Debtor 2								
(Spouse, i	if filing)	First Name	Middle	Name	Last Name			
United S	tates Ban	kruptcy Court for t	the:	Eastern	District of	Pennsylvania		
Case nui	mber						_	Check if this is an amended filing
								amonaca ming
<u>Officia</u>	I Forn	n 106A/B						
Sche	dule	A/B: Pr	operty	y				12/15
the categ equally re	ory whe	re you think it to ble for supplyin	fits best. Be ng correct in	e as comple nformation.	ete and accurate a	ns possible. If two needed, attach a	married people are fil	ategory, list the asset in ing together, both are form. On the top of any
Part 1	: De	escribe Each	Residence	e, Building	g, Land, or Othe	er Real Estate	ou Own or Have an	Interest In
1. D	o you ow	n or have any le	gal or equita	ble interest i	n any residence, bu	ilding, land, or sim	lar property?	
	_	to Part 2.						
	Yes. W	here is the proper	ty?					
					f your entries from e			\$0.00
Part 2	: De	escribe Your '	Vehicles					
							or not? Include any vehiclets and Unexpired Leases.	es
3. Car	rs, vans,	trucks, tractors,	sport utility v	ehicles, mot	orcycles			
√	Yes							
3.1	Make:		Buick	Who has a	n interest in the pro	perty? Check one.	Do not deduct secured of	laims or exemptions. Put
	Model:	:	Regal	✓ Debtor ✓ Debtor			•	ed claims on <i>Schedule D:</i> ims Secured by Property.
	Year:		2011	_	1 and Debtor 2 only one of the debtors a	nd another	Current value of the entire property?	Current value of the portion you own?
	Approx	kimate mileage:	125000	_	if this is community	property (see	\$3,649.00	\$3,649.00
	Other i	information:		instructi	ons)			
	Soul	rce of Value: Kl	ВВ					
4. Wa	tercraft, a	aircraft, motor ho	mes, ATVs a	nd other rec	reational vehicles, o	other vehicles, and	accessories	
	•	oats, trailers, moto	ors, personal v	watercraft, fisl	hing vessels, snowm	obiles, motorcycle ac	ccessories	
√	No							

☐ Yes

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5.		the portion you own for all of your entries from Part 2, including any entries for pages Part 2. Write that number here	\$3,649.00
Pai	rt 3: Describe Yo	ur Personal and Household Items	
Do yo	ou own or have any legal o	or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and fur Examples: Major appliance	rnishings es, furniture, linens, china, kitchenware	
	□ No		
	Yes. Describe	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$500.00
7.	collections; ele	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music actronic devices including cell phones, cameras, media players, games	
	☐ No ☑ Yes. Describe	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$300.00
8.		igurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or collections; other collections, memorabilia, collectibles	
9.		thobbies raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and antry tools; musical instruments	
10.	Yes. Describe Firearms Examples: Pistols, rifles, s	shotguns, ammunition, and related equipment	
	✓ No ☐ Yes. Describe		
11.	Clothes Examples: Everyday cloth	es, furs, leather coats, designer wear, shoes, accessories	
	☐ No ☑ Yes. Describe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$250.00

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12.	Jewelry Examples: Everyday iew	velry costume jewelry engag	gement rings, wedding rings, heirloom jewelry, watches, gems, gold,	
	silver	verry, coolaine jewerry, engag	jernont migs, wedding migs, nemeeni jeweny, watenes, gems, gold,	
	☐ No			
	Yes. Describe	Various used pieces	of jewelry.	\$150.00
13.	Non-farm animals			
	Examples: Dogs, cats, b	oirds, horses		
	√ No			
	Yes. Describe			
14.	Any other personal and	household items you did r	not already list, including any health aids you did not list	
	√ No			
	Yes. Give specific			
	information			
15.			t 3, including any entries for pages you have attached	\$1,200.00
	for Part 3. Write that hui	mber nere		
Pa	rt 4: Describe Y	our Financial Assets		
		l or equitable interest in an	v of the following?	Current value of the
<i>_</i>	ou own or have any legal	or equitable interest in an	y or the following.	portion you own?
				Do not deduct secured claims or exemptions.
16.	Cash			
	Examples: Money you ha	ave in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	
	√ No			
	☐ Yes		Cash:	
17.	Deposits of money			
17.	-	vings, or other financial acco	ounts; certificates of deposit; shares in credit unions, brokerage houses,	
			multiple accounts with the same institution, list each.	
	☐ No			
	√ Yes		Institution name:	
			American Heritage	
		17.1. Checking account:	Account Number: 2404	\$0.00
			Police and Fire FCU	
		17.2. Checking account:	Account Number: 0004	\$0.00
			American Heritage	
		17.3. Savings account:	Account Number: 2404	\$7,148.00
			Police and Fire FCU	
		17.4. Savings account:	Account Number: 0001	\$0.00

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18.	Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts
	✓ No
	☐ Yes
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture
	☑ No
	Yes. Give specific information about them
20.	Government and corporate bonds and other negotiable and non-negotiable instruments
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.
	☑ No
	Yes. Give specific information about them
21.	Retirement or pension accounts
	Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans
	√ No
	Yes. List each account separately.
22.	Security deposits and prepayments
	Your share of all unused deposits you have made so that you may continue service or use from a company
	Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others
	☑ No
	☐ Yes
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)
	☑ No
	☐ Yes
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).
	☑ No
	☐ Yes
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit
	☑ No
	Yes. Give specific information about them

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26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mon	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	☐ Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	
31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	☑ No	
	☐ Yes. Name the insurance company of each policy and list its value	
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	☑ No	
	☐ Yes Give specific information	

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Debtor Knight, Zahaire Dyshae

Case number (if known)

33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue							
	✓ No ☐ Yes. Describe each claim							
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims							
	☑ No ☐ Yes. Describe each claim							
35.	Any financial assets you did not alread	dy list						
	□ No							
	✓ Yes. Give specific information	Cash App	\$0.00					
		Pay Pal						
36.	-	ies from Part 4, including any entries for pages you have attached	\$7,148.00					
Pai	t 5: Describe Any Busines:	s-Related Property You Own or Have an Interest In. List any r	eal estate in Part 1.					
37.	Do you own or have any legal or equit	able interest in any business-related property?						
	☑ No. Go to Part 6.							
	Yes. Go to line 38.							
45.		ies from Part 5, including any entries for pages you have attached	\$0.00					
Pa	ι ο.	nd Commercial Fishing-Related Property You Own or Have an erest in farmland, list it in Part 1.	Interest In.					
46.	Do you own or have any legal or equit	able interest in any farm- or commercial fishing-related property?						
	✓ No. Go to Part 7.☐ Yes. Go to line 47.							
52.	•	ies from Part 6, including any entries for pages you have attached	\$0.00					
Pa	t 7: Describe All Property	You Own or Have an Interest in That You Did Not List Above						
53.	Do you have other property of any kin Examples: Season tickets, country club	•						
	☑ No							
	Yes. Give specific information							
54.	Add the dollar value of all of your entr	ies from Part 7. Write that number here	\$0.00					
Dai	t 8: List the Totals of Each	Dart of this Form						

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Debtor Knight, Zahaire Dyshae

Case number (if known)

55.	Part 1: Total real estate, line 2		→	\$0.00
56.	Part 2: Total vehicles, line 5	\$3,649.00		
57.	Part 3: Total personal and household items, line 15	\$1,200.00		
58.	Part 4: Total financial assets, line 36	\$7,148.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$11,997.00	Copy personal property total	+ \$11,997.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$11,997.00

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Fill in this information to identify your case:								
Debtor 1	Zahaire	Dyshae	Knight					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	sankruptcy Court for the	Eastern	District of Pennsylvania					
Case number								
(if known)				Check if this is an amended filing				

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Identify the Property You Claim as Exempt						
1.	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from Schedule A/B		eck only one box for each exemption.	Specific laws that allow exemption		
	Brief description: Line from Schedule A/B: 2011 Buick Regal 3.1	\$3,649.00	4	\$3,649.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)		
3.	Are you claiming a homestead exempt (Subject to adjustment on 4/01/28 and evi No Yes. Did you acquire the property cov No Yes	ery 3 years after that for ca	ıses fi	led on or after the date of adjustment.)			

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__ Case number (if known) __

Debtor 1

ZahaireDyshaeKnightFirst NameMiddle NameLast Name

	on of the property and le A/B that lists this	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
property		Copy the value from	Che	eck only one box for each exemption.	
		Schedule A/B			
Brief description:	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$500.00	ď	\$500.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used televisions, mobile devices, and computers, each valued at \$600 or	\$300.00			
	less.			\$300.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used articles of clothing, shoes, and accessories, each valued at \$600 or	\$250.00			
	less.			\$250.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	
Brief	Various used	\$150.00			
description:	pieces of jewelry.			\$150.00	11 U.S.C. § 522(d)(4)
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief description:	American Heritage Savings account	\$7,148.00			
	Acct. No.: 2404			\$7,148.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	

Fill in this inform	nation to identify your ca	ase:		
Debtor 1	Zahaire	Dyshae	Knight	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the	e: Eastern	District of Pennsylvania	
Case number (i	if			
known)				Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - Mo. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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Fill in this inform	mation to identify your c	ase:				
Debtor 1	Zahaire	Dyshae	Knight			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for th	e: Easte	rn Distri	ct of Pennsylvania	<u></u>	
Case number				_		
(if known)						Check if this is an amended filing
Official For	m 106E/F					
Schedu	ıle E/F: Cre	editors W	ho Have	Unsecure	d Claims	12/15
other party to a Form 106A/B) a claims that are	iny executory contract and on Schedule G: Ex listed in Schedule D: ries in the boxes on th	s or unexpired leas ecutory Contracts of Creditors Who Have	es that could resu and Unexpired Lea e Claims Secured b	t in a claim. Also list e ses (Official Form 106 by <i>Property</i> . If more sp	executory contracts iG). Do not include a pace is needed, copy	n NONPRIORITY claims. List the on Schedule A/B: Property (Officianty creditors with partially secured the Part you need, fill it out, pages, write your name and case
Part 1:	List All of Your PRI	ORITY Unsecure	d Claims			
	reditors have priority use to Part 2. List All of Your NOI					
3. Do any cr	editors have nonprior	ity unsecured claim	e against vou?			
_	ou have nothing to repor	-		t with your other sched	ules.	
nonpriority included in	unsecured claim, list th	ne creditor separately e creditor holds a pa	for each claim. For	each claim listed, ident	tify what type of claim	creditor has more than one it is. Do not list claims already nan three nonpriority unsecured
						Total claim
4.1 Capital	One		Last 4 digit	s of account number	2 3 8 9	\$1,050,00
	ty Creditor's Name					<u> </u>
Attn: B	ankruptcy		When was	the debt incurred?	8/6/2019	<u> </u>
PO Box	c 30285					
Number	Street			ate you file, the claim	is: Check all that app	oly.
Salt La	ke City, UT 84130-02	285	☐ Conting			
City	State	ZIP C	ode Unliquid			
Who inc	urred the debt? Check	one.	·			
✓ Debto	or 1 only			NPRIORITY unsecure	d claim:	
☐ Debto	•		☐ Student			ally cause at least years all all as a toward and
	or 1 and Debtor 2 only		U Obligation	•	aration agreement or	divorce that you did not report as
	ast one of the debtors ar			pension or profit-shari	ng plans, and other si	imilar debts
☐ Chec	k if this claim is for a	community debt	✓ Other. S	pecify CreditCard		
Is the cla	nim subject to offset?					

☐ Yes

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Debtor 1

Zahaire Dyshae Knight Case number (if known)

First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim			
4.2	Cornerstone	Last 4 digits of account number 1 3 7 5	\$5,756.00			
	Nonpriority Creditor's Name	When we the debt in some 10				
	PO Box 82561	When was the debt incurred? 9/1/2018				
	Number Street	•				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501	Contingent				
	City State ZIP Code	Unliquidated				
	Oily State Zir Code	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	☑ Debtor 1 only	· · · · · · · · · · · · · · · · · · ·				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 				
	At least one of the debtors and another					
	☐ Check if this claim is for a community debt	☐ Other. Specify				
	Is the claim subject to offset?					
	√ No					
	☐ Yes					
4.3	Cornerstone	Last 4 digits of account number 1 1 7 5	\$4.685.00			
	Nonpriority Creditor's Name	Last 4 digits of account number 1 1 7 5	\$4,665.00			
		When was the debt incurred? 9/1/2017				
	PO Box 82561	· ————				
	Number Street	As of the determinantial the electricity Observation that combine				
		As of the date you file, the claim is: Check all that apply.				
	Lincoln, NE 68501	Contingent				
	City State ZIP Code	□ Unliquidated □ Disputed				
	Who incurred the debt? Check one.	☐ Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☑ Student loans				
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did no	ot report as			
	☐ At least one of the debtors and another	priority claims				
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	·	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Debtor 1

rt 2: Your NONPRIORITY Unsecured Claims —	- Continuation Page					
listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.				Total claim
Cornerstone	Last 4 digits of account number	0	9	7	5	\$4,656.00
Nonpriority Creditor's Name	When was the debt incurred?		10/	1/20)16	-
Number Street	As of the date you file, the claim is	s: Che	eck a	all th	at ap	ply.
Lincoln, NE 68501	•					
City State ZIP Code	☐ Unliquidated☐ Disputed					
 ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No 	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify					
· - ···						
Nonpriority Creditor's Name PO Box 82561	When was the debt incurred?					<u>\$3,638.00</u>
Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify					r divorce that you did not report as similar debts
	Cornerstone Nonpriority Creditor's Name PO Box 82561 Number Street Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes Cornerstone Nonpriority Creditor's Name PO Box 82561 Number Street Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so for Cornerstone Last 4 digits of account number When was the debt incurred?	Listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.	Listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.	Ilisting any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Cornerstone	Ilisting any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Cornerstone

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Debtor 1

Zahaire Dyshae Knight Case number (if known)

First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.6	Cornerstone	Last 4 digits of account number 9 2 7 5 \$3,247.00
	Nonpriority Creditor's Name	· ———
	PO Box 82561	When was the debt incurred? 7/1/2023
	Number Street	
		As of the date you file, the claim is: Check all that apply.
		Contingent
	Lincoln, NE 68501	□ Unliquidated
	City State ZIP Code	Disputed
	Who incurred the debt? Check one.	- ////
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 2 only	☑ Student loans
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	Other. Specify
	Is the claim subject to offset?	
	☑ No	
	☐ Yes	
4.7	Cornerstone	Last 4 digits of account number 6 1 7 5 \$3,229.00
	Nonpriority Creditor's Name	
	PO Box 82561	When was the debt incurred? 10/1/2023
	Number Street	
		As of the date you file, the claim is: Check all that apply.
	Lincoln, NE 68501	Contingent
	City State ZIP Code	Unliquidated
		☐ Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	Debtor 1 only	✓ Student loans
	Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as
	Debtor 1 and Debtor 2 only	priority claims
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☐ Other. Specify
	Is the claim subject to offset?	
	☑ No	
	☐ Yes	

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Debtor 1

Pa	t 2: Your NONPRIORITY Unsecured Claims —	Continuation Page						
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.					Total claim
4.8	Cornerstone	Last 4 digits of account number	4	9	7	5		\$3,114.00
	Nonpriority Creditor's Name	When was the debt incurred?		6/1/	202	_		
	PO Box 82561	when was the dept incurred?		0/1/	202	4	-	
	Number Street	As of the date you file, the claim is:	: Che	ck all	that	annly		
	L'andre NE 00504	Contingent	. 0110	on an	uiu	арріў.	•	
	Lincoln, NE 68501 City State ZIP Code	□ Unliquidated						
		Disputed						
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured of	claim	:				
	☑ Debtor 1 only ☐ Debtor 2 only	☑ Student loans						
	Debtor 1 and Debtor 2 only	Obligations arising out of a separa	ation a	agree	mer	nt or div	vorce that you did n	ot report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	nlane	e and	l oth	ar cimi	ilar dehte	
	☐ Check if this claim is for a community debt	Other. Specify						
	Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·						
	☑ No							
	☐ Yes							
4.9	Cornerstone	Last 4 digits of account number	0	8	7	5		\$2,524.00
	Nonpriority Creditor's Name	When was the debt incurred?		0/4/	204	_		
	PO Box 82561	when was the dept incurred?		9/1/	201	<u> </u>	-	
	Number Street							
		As of the date you file, the claim is:	: Che	ck all	that	apply.	•	
	Lincoln, NE 68501	☐ Contingent ☐ Unliquidated						
	City State ZIP Code	☐ Disputed						
	Who incurred the debt? Check one.	T (NONDRIGHTY						
	☑ Debtor 1 only	Type of NONPRIORITY unsecured o	claım	:				
	☐ Debtor 2 only	Student loans					d e Pi	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separa priority claims 	ation a	agree	mer	nt or aiv	vorce that you did n	ot report as
	At least one of the debtors and another	Debts to pension or profit-sharing	plans	s, and	doth	er simi	ilar debts	
	☐ Check if this claim is for a community debt	Other. Specify						
	Is the claim subject to offset?							
	☑ No							
	☐ Yes							

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Debtor 1

rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
Cornerstone	Last 4 digits of account number 1 0 7 5 \$2,371.00
Nonpriority Creditor's Name	
PO Box 82561	When was the debt incurred? 10/1/2016
Number Street	
	As of the date you file, the claim is: Check all that apply.
Lincoln NE 69504	Contingent
	Unliquidated
,	☐ Disputed
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes Cornerstone Nonpriority Creditor's Name	Type of NONPRIORITY unsecured claim: ✓ Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Last 4 digits of account number 1 2 7 5 \$2,353.00 When was the debt incurred? 9/1/2017
Number Street	
	As of the date you file, the claim is: Check all that apply.
Lincoln NE 68501	Contingent
	☐ Unliquidated
Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No	 □ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify
	Cornerstone Nonpriority Creditor's Name PO Box 82561 Number Street Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Lincoln, NE 68501 Cornerstone Nonpriority Creditor's Name PO Box 82561 Number Street Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Cornerstone Nonpriority Creditor's Name PO Box 82561 Number Street Lincoln, NE 68501 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?

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Debtor 1

Pa	Your NONPRIORITY Unsecured Claims —	- Continuation Page	
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim
4.12	Cornerstone	Last 4 digits of account number 1 4 7 5	\$2,294.00
	Nonpriority Creditor's Name	When was the debt incurred? 9/1/2018	
	PO Box 82561	When was the debt incurred? 9/1/2018	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Lincoln, NE 68501	☐ Contingent ☐ Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who incurred the debt? Check one.		
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	☑ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not priority claims 	report as
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?		
	☑ No		
	☐ Yes		
4.13	Cornerstone	Last 4 digits of account number 9 1 7 5	\$1,759.00
	Nonpriority Creditor's Name		
	PO Box 82561	When was the debt incurred? 7/1/2023	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Lincoln, NE 68501	Contingent	
	City State ZIP Code	□ Unliquidated □ Disputed	
	Who incurred the debt? Check one.	- Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not	report as
	At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a community debt	Other. Specify	
	Is the claim subject to offset?		
	☑ No		
	☐ Yes		

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Debtor 1

		Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.14	Cornerstone	Last 4 digits of account number 6 0 7 5 \$1,759.00
	Nonpriority Creditor's Name	
	PO Box 82561	When was the debt incurred? 10/1/2023
	Number Street	
		As of the date you file, the claim is: Check all that apply.
		Contingent
	Lincoln, NE 68501	Unliquidated
	City State ZIP Code	☐ Disputed
	Who incurred the debt? Check one.	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☑ Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	Other. Specify
	In the plains publicat to affect?	
	Is the claim subject to offset?	
	☑ No □ Yes	
	☐ Yes	
4.15	Cornerstone	Last 4 digits of account number 1 5 7 5 \$1,439.00
	Nonpriority Creditor's Name	When we the debt in some 10.
	PO Box 82561	When was the debt incurred? 5/1/2019
	Number Street	•
		As of the date you file, the claim is: Check all that apply.
	Lincoln NE 69504	As of the date you file, the claim is: Check all that apply. Contingent
	Lincoln, NE 68501	• • • • • • • • • • • • • • • • • • • •
	City State ZIP Code	☐ Contingent
	City State ZIP Code Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated ☐ Disputed
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	 ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1

Pa	Your NONPRIORITY Unsecured Claims —	Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.16	Cornerstone	Last 4 digits of account number 1 6 7 5 \$559.00
	Nonpriority Creditor's Name	<u> </u>
	PO Box 82561	When was the debt incurred? 5/1/2019
	Number Street	•
		As of the date you file, the claim is: Check all that apply.
	Lincoln, NE 68501	☐ Contingent
	City State ZIP Code	Unliquidated
	,	☐ Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	☑ Debtor 1 only	☑ Student loans
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	-	Other. Specify
	Is the claim subject to offset?	
	☑ No	
	Yes	
4.17	Discover Financial	Last 4 digits of account number 8 8 7 5 \$6,502.00
	Nonpriority Creditor's Name	
	Attn: Bankruptcy	When was the debt incurred? 7/1/2016
	2500 Lake Cook Rd	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Riverwoods, IL 60015-3851	☐ Contingent
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one.	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☑ Other Specify CreditCard
	Is the claim subject to offset?	
	☑ No	
	☐ Yes	

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__ Case number (if known) __

Debtor 1

ZahaireDyshaeKnightFirst NameMiddle NameLast Name

After listing any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so fo	orth.	Total claim				
18 Jpmcb	Last 4 digits of account number	3 2 9 3	\$15,894.0				
Nonpriority Creditor's Name							
MailCode LA4-7100 700 Kansas Lane	When was the debt incurred?	12/1/2018					
Number Street							
	As of the date you file, the claim is	s: Check all that apply.					
Monroe, LA 71203	☐ Contingent						
·	Code Unliquidated						
City State ZIF	Disputed						
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	alaim.					
✓ Debtor 1 only		Ciaiii.					
Debtor 2 only	☐ Student loans	unting namenage of all large - the tree					
Debtor 1 and Debtor 2 only	priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as					
At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar debts					
☐ Check if this claim is for a community debt	✓ Other Specify CreditCard						
Is the claim subject to offset?							
☑ No							
☐ Yes							
19 Police & Fire FCII	Land Address of a construction		***				
- Folice & File FCO	Last 4 digits of account number	4 4 6 1	\$20,362.0				
Nonpriority Creditor's Name	When was the debt incurred?	6/1/2017					
Attn: Bankruptcy							
901 Arch Street		O.					
Number Street	As of the date you file, the claim is	s: Check all that apply.					
Philadelphia,, PA 19107	☐ Contingent						
- "	Unliquidated						
Miles in surround the debt O Observer	☐ Disputed						
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
☑ Debtor 1 only	☐ Student loans						
Debtor 2 only	Obligations arising out of a sepa						
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims						
☐ Check if this claim is for a community debt							
- Officer in this claim is for a community dept	☑ Other. Specify CreditCard						
Is the claim subject to offset?							
☑ No							
□ Voc							

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Orlando, FL 32896-5064

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☑ Debtor 1 only

☐ Debtor 2 only

☑ No ☐ Yes

Who incurred the debt? Check one.

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Page 29 of 51 Document Debtor 1 Zahaire Dyshae Knight Case number (if known) _ First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page Total claim After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. 4.20 Synchrony/PayPal Credit Last 4 digits of account number \$11,667.00 4 5 4 9 Nonpriority Creditor's Name When was the debt incurred? 4/1/2020 Attn: Bankruptcy PO Box 965064 As of the date you file, the claim is: Check all that apply. Number Street

Contingent

Disputed

ZIP Code

■ Unliquidated

■ Student loans

priority claims

☑ Other. Specify CreditCard

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not report as

☐ Debts to pension or profit-sharing plans, and other similar debts

Official	Form	106E/F

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Debtor 1

Zahaire Dyshae Knight Case number (if known) _
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$0.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$43,383.00 from Part 2 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other 6h. 6h. \$0.00 similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$55,475.00 Write that amount here. 6j. Total. Add lines 6f through 6i. 6j. \$98,858.00

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Fill in this inform	ation to identify your ca	ase:					
Debtor 1	Zahaire	Dyshae	Knight				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name		_		
United States E	Bankruptcy Court for the	e: Eastern	Distric	ct of	Pennsylvania		
Case number (if known)				_			Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 🗹 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or co	mpany with whom you have th	ne contract or lease	State what the contract or lease is for
2.1				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.3				
	Name			
	Number	Street		
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

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				Document Page	e 32 of 51	•
Fill in	this inform	nation to identify yo	ur case:			
Deb	tor 1	Zahaire	Dyshae	Knight		
		First Name	Middle Name	Last Name		
	tor 2					
(Spo	use, if filing)	First Name	Middle Name	Last Name		
Unit	ed States E	Bankruptcy Court fo	or the: Easte	n District of	Pennsylvania	
Cas	e number					
(if kn	own)					☐ Check if this is an amended filing
Offic	ial Forr	n 106H				-
2CI	neau	ie H: You	ur Codebto	<u>rs</u>		12/15
iling t he en	ogether, b	ooth are equally re	esponsible for supplyir	g correct information. If m	ore space is needed, c	urate as possible. If two married people are opy the Additional Page, fill it out, and number Pages, write your name and case number (if
1.	Do you h	ave any codebtor	s? (If you are filing a joir	nt case, do not list either spo	use as a codebtor.)	
	₫ No					
	☐ Yes					
2.				unity property state or ter vuerto Rico, Texas, Washing		erty states and territories include Arizona,
		o to line 3.				
	☐ Yes. L		rmer spouse, or legal eq	uivalent live with you at the	time?	
	_		unity state or territory did	vou live?	Fill in the	name and current address of that person.
			,,			
	N	ame of your spous	e, former spouse, or leg	al equivalent		
	N	umber	Street			
	_					
	С	ity	State	ZIP Code		
3.	2 again a	s a codebtor only	if that person is a gua	rantor or cosigner. Make s	ure you have listed the	filing with you. List the person shown in line creditor on <i>Schedule D</i> (Official Form 106D), <i>le E/F</i> , or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: T	he creditor to whom you owe the debt
					Check all so	hedules that apply:
3.1						
	Name				☐ Schedule	e D, line
			O: .		Schedule	e E/F, line
	Number		Street		☐ Schedule	e G, line
	City		State	Z	IP Code	
3.2						
	Name				☐ Schedule	e D, line
					Schedule	e E/F, line
	Number		Street		☐ Schedule	e G, line

ZIP Code

State

City

Fill in this inform	ation to identify yo	our case:		
Debtor 1	Zahaire	Dyshae	Knight	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is:
United States E	Bankruptcy Court fo	or the: Eastern	District of Pennsyl	vania ☐ An amended filing ☐ A supplement showing postpetition cha
Case number				13 income as of the following date:
(if known)				MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employme	ent								
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse				
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed			☐ Employed ☐ Not employed				
Include part-time, seasonal, or self-employed work.	Occupation Employer's name								
or homemaker, if it applies.	Employer's address	Number Street			Number Street				
		City	State	ZIP Code	City Sta	ate ZIP Code			
1	How long employed there?					-			
Part 2: Give Details About N	Monthly Income								
Estimate monthly income as of th unless you are separated.	e date you file this form. If y	ou have nothing	to report	for any line, write \$0) in the space. Include	your non-filing spouse			
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.									
				For Debtor 1	For Debtor 2 or non-filing spouse				
List monthly gross wages, salary, deductions). If not paid monthly, calculated a second control of the se			2	\$0.00					
3. Estimate and list monthly overtim	ne pay.		3. +	\$0.00	+				
4. Calculate gross income. Add line 2	2 + line 3.		4.	\$0.00					

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Debtor 1

Knight Zahaire Dyshae Case number (if known) First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse \$0.00 Copy line 4 here.... → 4. 5. List all payroll deductions:

	5a.	Tax, Medicare, and Social Security deductions	5a.		\$0.00			_			
	5b.	Mandatory contributions for retirement plans	5b.		\$0.00			_			
	5c.	Voluntary contributions for retirement plans	5c.		\$0.00			_			
	5d.	Required repayments of retirement fund loans	5d.		\$0.00			_			
	5e.	Insurance	5e.		\$0.00		-	_			
	5f.	Domestic support obligations	5f.		\$0.00			_			
	5g.	Union dues	5g.		\$0.00			_			
	5h	Other deductions. Specify:	5h. •	+	\$0.00	+	-	_			
		the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.		\$0.00			-			
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$0.00			-			
8.	List	all other income regularly received:									
	8a.	Net income from rental property and from operating a business, profession, or farm									
		Attach a statement for each property and business showing gross receipts,									
		ordinary and necessary business expenses, and the total monthly net income.	8a.		\$0.00			_			
	8b.	Interest and dividends	8b.		\$0.00			_			
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$0.00			_			
	8d.	Unemployment compensation	8d.		\$0.00			_			
	8e.	Social Security	8e.		\$0.00			_			
	8f.	Other government assistance that you regularly receive									
		Include cash assistance and the value (if known) of any non-cash									
		assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.									
		Specify:	8f.		\$0.00			_			
	8g.	Pension or retirement income	8g.		\$0.00			_			
	8h.	Other monthly income. Specify: Pro-rated 2024 Tax Refund	8h. •	+	\$145.00	+		_			
9.	Add	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.		\$145.00]			
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		\$145.00	+[]=[_	\$145	5.00
11. State all other regular contributions to the expenses that you list in Schedule J.											
		ude contributions from an unmarried partner, members of your household, younds or relatives.	ur de	penden	ts, your roomma	ites,	, and other				
	Do r	not include any amounts already included in lines 2-10 or amounts that are n	ot ava	ilable to	pay expenses	liste	ed in Schedule J.				
	Spe	cify:					11	.+		\$0	0.00

Entered 05/30/25 10:19:58 Case 25-12164 Filed 05/30/25 Doc 1 Document Page 35 of 51 Debtor 1 Knight Zahaire Dyshae Case number (if known) First Name Middle Name Last Name 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$145.00 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ✓ No. Yes. Explain:

Desc Main

Official Form 106I Schedule I: Your Income page 3 Case 25-12164 Doc 1 Filed 05/30/25 Entered 05/30/25 10:19:58 Desc Main Document Page 36 of 51

Fill in this information	to identify your case:				
Debtor 1	Zahaire First Name	Dyshae Middle Name	Knight Last Name		Check if this is: ☐ An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		A supplement showing postpetition chapter 13 expenses as of the following date:
United States Bankruptcy Court for the:		Eastern District of Pennsylvania		nsylvania	MM / DD / YYYY
Case number (if known)					WWW, BB, TTTT

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Describe Your Household	d							
1.	Is this a joint case?								
	No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.								
2.	2. Do you have dependents? ✓ No								
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?				
	Do not state the dependents' names.				. No. Yes.				
					. No. Yes.				
					. No. Yes.				
					. No. Yes.				
					No. Yes.				
3. Do your expenses include expenses of people other than yourself and your dependents? ✓ No Yes									
Part 2: Estimate Your Ongoing Monthly Expenses									
Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date.									
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.)									
4.	The rental or home ownership experts for the ground or lot.	4	\$0.00						
If not included in line 4:									
	4a. Real estate taxes	4a	\$0.00						
4b. Property, homeowner's, or renter's insurance					\$0.00				
4c. Home maintenance, repair, and upkeep expenses					\$0.00				
4d. Homeowner's association or condominium dues					\$0.00				

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Debtor 1 Zahaire Dyshae Knight Case number (if known)

Last Name

First Name

Middle Name

	Yo	our expenses
. Additional mortgage payments for your residence, such as home equity loans	5	\$0.00
. Utilities:		
6a. Electricity, heat, natural gas	6a	\$0.00
6b. Water, sewer, garbage collection	6b	\$0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$0.00
6d. Other. Specify:	6d.	\$0.00
Food and housekeeping supplies	7.	\$650.00
. Childcare and children's education costs	8	\$0.00
. Clothing, laundry, and dry cleaning	9	\$150.00
0. Personal care products and services	10.	\$175.00
Medical and dental expenses	11.	\$125.00
Transportation. Include gas, maintenance, bus or train fare.Do not include car payments.	12.	\$300.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13	\$100.00
4. Charitable contributions and religious donations	14.	\$0.00
5. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	\$0.00
15a. Life insurance		\$0.00 \$0.00
15b. Health insurance 15c. Vehicle insurance	15b 15c	\$45.00
	150	
15d. Other insurance. Specify:	15d	\$0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	16.	\$0.00
7. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a	\$0.00
17b. Car payments for Vehicle 2	17b	\$0.00
17c. Other. Specify:	17c	\$0.00
17d. Other. Specify:	17d	\$0.00
3. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	\$0.00
9. Other payments you make to support others who do not live with you.		
Specify:	19.	\$0.00
O. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	е.	
20a. Mortgages on other property	20a	\$0.00
20b. Real estate taxes	20b	\$0.00
20c. Property, homeowner's, or renter's insurance	20c	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d	\$0.00
20e. Homeowner's association or condominium dues	20e	\$0.00

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Debtor 1 **Zahaire Dyshae Knight** Case number (if known) -First Name Middle Name Last Name 21. Other. Specify: 21. \$0.00 22. Calculate your monthly expenses. 22a. \$1,545.00 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$1,545.00 23. Calculate your monthly net income. 23a. \$145.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$1,545.00 23c. Subtract your monthly expenses from your monthly income. (\$1,400.00) The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. Yes.

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Fill in this informatio	n to identify your case	:	
Debtor 1	Zahaire	Dyshae	Knight
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	cruptcy Court for the:	Easte	ern District of Pennsylvania
Case number (if known)			

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new Summary and check the box at the top of this page.	ai ioiilis, you iliust ilii out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	<u>\$0.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$11,997.00
1c. Copy line 63, Total of all property on Schedule A/B	\$11,997.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$98,858.00
Your total liabilities	\$98,858.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$145.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,545.00

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				3		
Debtor 1	Zahaire	Dyshae	Knight		Case number (if known)	
	First Name	Middle Name	Last Name			

Par	art 4: Answer These Questions for Administrative and Statistical Records						
	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☑ Yes						
5	What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ✓ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.						
	from the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	n Official	\$4,475.61				
9. C	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim					
	From Part 4 on Schedule E/F, copy the following:						
	9a. Domestic support obligations (Copy line 6a.)	\$0.00					
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00					
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00					
	9d. Student loans. (Copy line 6f.)	\$43,383.00					
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00					
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00					
	9g. Total . Add lines 9a through 9f.	\$43,383.00					

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Fill in this information to identify your case:						
Debtor 1	Zahaire	Dyshae	Knight			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankr	uptcy Court for the:	Easte	rn District of Pe	nnsylvania		
Case number (if known)						

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
√ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
lander manality of marity, I dealers that I have read	the common and schedules filed with this declaration and that they are two and sowers
inder penalty of perjury, I declare that I have read	the summary and schedules filed with this declaration and that they are true and correct.
X /s/ Zahaire Dyshae Knight	
Zahaire Dyshae Knight, Debtor 1	
Date 05/30/2025	
MM/ DD/ YYYY	

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Fill in this information	to identify your case:			
Debtor 1	_Zahaire	Dyshae	Knight	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylvania	
Case number (if known)				Check if this amended fill

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

What is your current marital status?						
☐ Married						
✓ Not married						
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?				
☑ No						
Yes. List all of the places you lived in the	ne last 3 years. Do not includ	le where you live now.				
3. Within the last 8 years, did you ever live vertirories include Arizona, California, Idaho,						
√ No						
☐ Yes. Make sure you fill out Schedule H	: Your Codebtors (Official Fo	orm 106H).				
Part 2: Explain the Sources of Your Income						
Part 2: Explain the Sources of Your I	Income					
4. Did you have any income from employmer. Fill in the total amount of income you receive if you are filing a joint case and you have incential. No	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	ears?		
4. Did you have any income from employmer. Fill in the total amount of income you receive. If you are filing a joint case and you have income.	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	rears?		
4. Did you have any income from employmers. Fill in the total amount of income you receive a lif you are filing a joint case and you have income. No	ent or from operating a bused from all jobs and all busing	esses, including part-time a	ctivities.	rears?		
4. Did you have any income from employmers. Fill in the total amount of income you receive a lif you are filing a joint case and you have income. No	ent or from operating a bus ed from all jobs and all busin ome that you receive togeth	esses, including part-time a	Debtor 2 Sources of income	rears? Gross Income		
4. Did you have any income from employmer. Fill in the total amount of income you receive if you are filing a joint case and you have income. No	ent or from operating a bused from all jobs and all busing ome that you receive togeth	esses, including part-time a er, list it only once under De	ctivities. ebtor 1. Debtor 2			
4. Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have income No	ent or from operating a bused from all jobs and all busingome that you receive togeth Debtor 1 Sources of income	esses, including part-time a er, list it only once under De Gross Income (before deductions and	Debtor 2 Sources of income	Gross Income (before deductions and		

For last cal	Zahaire First Name endar year:	Dysha Middle N		Document Knight	Page 43 of 5	
		Middle N	Vlame			Case number (if known)
	endar year:		N ame	Last Name		•
(barraary r	to December 3	1 2024)		ages, commissions, nuses, tips _	\$28,304.00	☐ Wages, commissions, bonuses, tips
	to Becerriber o	YYYY /	Оре	erating a business		Operating a business
	endar year befo			ages, commissions, nuses, tips	\$59,260.00	☐ Wages, commissions, bonuses, tips
(January 1	to December 3	YYYY)	Оре	erating a business		Operating a business
Include incompublic benefit filing a joint cannot be a filing a joint cannot be a filing a year. Yes. Fill	ne regardless of payments; pen ase and you ha	whether that in sions; rental in ve income that	ncome is come; int you rece	terest; dividends; mon vived together, list it on	other income are alimo ey collected from lawsu ily once under Debtor 1	ony; child support; Social Security, unemployment, and othe uits; royalties; and gambling and lottery winnings. If you are .
Part 3: List	Certain Pay	ments You N	Made Be	efore You Filed for	Bankruptcy	
6. Are either I	Debtor 1's or De	ebtor 2's debts	primarily	/ consumer debts?		
				arily consumer debts		defined in 11 U.S.C. § 101(8) as "incurred by
	•				y any creditor a total of	\$8,575* or more?
	No. Go to line	e 7.				
	paid th	nat creditor. Do	not inclu	, ,	estic support obligations	e or more payments and the total amount you s, such as child support and alimony. Also, do
*	Subject to adju	stment on 4/01	/28 and 6	every 3 years after tha	at for cases filed on or a	fter the date of adjustment.
✓ Yes. □	ebtor 1 or Deb	tor 2 or both h	ave nrim	arily consumer debts		
			-	-	y any creditor a total of	\$600 or more?
5	No. Go to line	e 7.				
	include		domestic	c support obligations,		total amount you paid that creditor. Do not nd alimony. Also, do not include payments to
Insiders incluyou are an of	de your relative icer, director, p	s; any general erson in contro	partners; ol, or own	relatives of any gene er of 20% or more of t	ral partners; partnership heir voting securities; a	anyone who was an insider? ps of which you are a general partner; corporations of which and any managing agent, including one for a business you such as child support and alimony.
√ No						
Yes. List	all payments to	o an insider.				
	ear before you t ents on debts g				ents or transfer any pr	operty on account of a debt that benefited an insider?
	all payments the	nat henefited o	n insider			
103. LISI	. an payments t	iat bonomeu a				

Case 25-12164 Doc 1 Filed 05/30/25 Entered 05/30/25 10:19:58 Desc Main Page 44 of 51 Document Debtor 1 Zahaire Dyshae Knight Case number (if known). First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and **✓** No Yes. Fill in the details. 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **✓** No Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes List Certain Gifts and Contributions Part 5: 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? ■ No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your loss Value of property lost how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. loss 2 watches (Rolex) 1 None \$50,000.00 diamond chain and 2 diamond 03/2024 pendets

	Case 25-1	.2164 D	oc 1	Filed 05/30/25 Document	Entered 05 Page 45 of 5	5/30/25 10:19:58 51	Desc Main
btor 1	Zahaire	Dyshae		Knight		Case number (if kno	own)
	First Name	Middle Na	me	Last Name		·	·
art 7: Lis	t Certain Payme	ents or Tran	sfers				
•							
bout seekii	ng bankruptcy or p	reparing a ba	nkruptcy	petition?		pay or transfer any property quired in your bankruptcy.	y to anyone you consulted
√1 Yes Fil	Il in the details.						
		D	escriptior	n and value of any pro	perty transferred	Date payment or transfer was made	Amount of payment
Cibik La		Δŧ	tornev's	Fee; Attorney's Co	ete	transier was made	
4500 111			torney o	1 00, 7 111011107 0 00		03/20/2025	\$2,150.00
	Inut Street Suite Street	900					
Number	Street					03/20/2025	\$575.00
Philadel	phia, PA 19102						
City		IP Code					
mail@ci	biklaw.com						
Email or we	bsite address						
D 12"	Madau B	4 NI=4 N/					
Person Who	Made the Payment, it	f Not You					
I8. Within 2 ordinary counclude both Do not include	urse of your busine outright transfers a	ess or financia nd transfers n	al affairs? nade as s		anting of a security i	property to anyone, other to nterest or mortgage on your	han property transferred in the property).
These are c	0 years before you often called asset-pr			d you transfer any pro	operty to a self-settl	ed trust or similar device of	which you are a beneficiary?
√ No							
Yes. Fil	Il in the details.						
art 8: Lis	t Certain Financ	cial Accoun	ts, Instr	uments, Safe Dep	osit Boxes, and S	Storage Units	
or transferre	ed?	ey market, or	other fina	ncial accounts; certific		eld in your name, or for you es in banks, credit unions, br	r benefit, closed, sold, moved rokerage houses, pension
√ No							
Yes. Fil	ll in the details.						

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Debtor 1	Zahaire	Dyshae	Knight	Case number (if known)
	First Name	Middle Name	Last Name	
21. Do you valuables?	now have, or did yo	ou have within 1 year	before you filed for bankru	uptcy, any safe deposit box or other depository for securities, cash, or other
√ No				
☐Yes. F	ill in the details.			
_	u stored property i	in a storage unit or pla	ace other than your home v	within 1 year before you filed for bankruptcy?
✓ No				
☐ Yes. F	ill in the details.			
Part 0: Ide	antify Property \	You Hold or Contro	ol for Someone Else	
art 7. Tak	enting Property	Tod Flora of Contro	or for someone Lise	
	hold or control any	property that someon	ne else owns? Include any	property you borrowed from, are storing for, or hold in trust for someone.
✓ No				
☐ Yes. F	ill in the details.			
Part 10: C	Sive Details Abo	ut Environmental I	nformation	
For the pur	pose of Part 10, the	e following definitions	apply:	
substar	ices, wastes, or ma		soil, surface water, ground	ncerning pollution, contamination, releases of hazardous or toxic water, or other medium, including statutes or regulations controlling the
	ans any location, fa		efined under any environme	ental law, whether you now own, operate, or utilize it or used to own, operate,
■ Hazard	• .	anything an environm	ental law defines as a haza	ardous waste, hazardous substance, toxic substance, hazardous material,
•			ou know about, regardless	of when they occurred.
24. Has any	governmental uni	t notified you that you	may be liable or potentiall	ly liable under or in violation of an environmental law?
√ No				
☐Yes. F	ill in the details.			
•	u notified any gove	ernmental unit of any	release of hazardous mate	rial?
√ No				
☐ Yes. F	ill in the details.			
26. Have yo	ou been a party in a	ny judicial or adminis	trative proceeding under a	ny environmental law? Include settlements and orders.
√ No				
☐ Yes. F	ill in the details.			

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Debtor 1	Zahaire	Dyshae	Knight	Case number (if I	known)			
Part 11: Giv	First Name ve Details Abo	Middle Name ut Your Business o	Last Name or Connections to Any Business					
_	•	• •	lid you own a business or have any of the	_	ny business?			
			e, profession, or other activity, either full-til	me or part-time				
A m	A member of a limited liability company (LLC) or limited liability partnership (LLP)							
ДАр	☐ A partner in a partnership							
☐ An	☐ An officer, director, or managing executive of a corporation							
☐ An	owner of at least s	5% of the voting or equ	uity securities of a corporation					
☑ No. Non	e of the above ap	plies. Go to Part 12.						
Yes. Ch	eck all that apply a	above and fill in the de	etails below for each business.					
creditors, or ✓ No	rears before you to other parties.		lid you give a financial statement to anyo	ne about your business? In	clude all financial institutions,			
					'			
Part 12: Sig	an Below							
and correct. bankruptcy of the	understand that ase can result in ahaire Dyshae	making a false staten fines up to \$250,000,	cial Affairs and any attachments, and I de nent, concealing property, or obtaining m or imprisonment for up to 20 years, or be	noney or property by fraud in	connection with a			
☑ No ☐ Yes			of Financial Affairs for Individuals Filing a		n 107)?			
√ No								
☐ Yes. Na	me of person			Attach the Bankruptcy Pe Declaration, and Signatur				

Fill in this information	to identify your case		
Debtor 1	Zahaire	Dyshae	Knight
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Eastern District of Pennsylvania	
Case number (if known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral What do you intend to do with the property that secures Did you claim the property as a debt? Did you claim the property as exempt on Schedule C?

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2: List	Your Unexpired	Personal Property	Leases	
rmation be	elow. Do not list rea	Il estate leases. Unexp		ts and Unexpired Leases (Official Form 106G), fill in the effect; the lease period has not yet ended. You may assume
Describe y	our unexpired pers	sonal property leases		Will the lease be assumed?
essor's nai	me:			☐ No
escription roperty:	of leased			☐ Yes
essor's nai	me:			☐ No
escription roperty:	of leased			☐ Yes
essor's nai	me:			☐ No
escription roperty:	of leased			☐ Yes
essor's naı	me:			□ No
escription roperty:	of leased			☐ Yes
essor's nai	me:			□ No
escription roperty:	of leased			☐ Yes
essor's nai	me:			☐ No
escription roperty:	of leased			☐ Yes
essor's naı	me:			☐ No
escription roperty:	of leased			☐ Yes
	n Below			

Signature of Debtor 1

Date 05/30/2025

MM/ DD/ YYYY

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	k	Knight, Zahaire D	yshae					
					Cas	se No		_
Debt	or				Cha	apter	7	-
			DISCLOSURE OF	COMPENSAT	TION OF ATTO	RNEY FO	R DEBTOR	
1.	com	npensation paid to	C. § 329(a) and Fed. Ba o me within one year be behalf of the debtor(s) i	fore the filing of the	e petition in bankru	uptcy, or agre	ed to be paid to	me, for services rendered
	For	legal services, I h	nave agreed to accept					\$2,150.00
	Prio	or to the filing of th	nis statement I have rece	eived			<u> </u>	\$2,150.00
	Bala	ance Due						\$0.00
2.	The	source of the co	mpensation paid to me	was:				
	\(\sqrt{1} \)	Debtor	Other (specify)					
3.	The	source of compe	ensation to be paid to me	e is:				
	☑	Debtor	Other (specify)					
4.	_	I have not agree firm.	d to share the above-dis	sclosed compensat	tion with any other	r person unle	ss they are mer	mbers and associates of m
		=	share the above-disclosue agreement, together v	•		-		embers or associates of m
5.	In re	eturn for the abov	re-disclosed fee, I have	agreed to render le	egal service for all	aspects of th	e bankruptcy c	ase, including:
	a.	Analysis of the bankruptcy;	debtor' s financial situati	ion, and rendering	advice to the debt	tor in determi	ning whether to	file a petition in
	b.	Preparation and	d filing of any petition, so	chedules, statemer	nts of affairs and p	lan which ma	y be required;	
	C.	Representation	of the debtor at the mee	eting of creditors a	nd confirmation he	earing, and ar	ny adjourned he	earings thereof;
6.	Вуа	agreement with th	ne debtor(s), the above-	disclosed fee does	not include the fol	llowing service	ces:	

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/30/2025 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm